#### **STATE OF MAINE**

#### COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

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## POLITICAL ACTION COMMITTEE CAMPAIGN FINANCE REPORT 2005

	Acro	Acronym		
Mailing address	Official Headquarters of PAC)		CHECK IF CHANGED SINCE PREVIOUS	
City, Zip Code			REPORT	
Telephone number	Fax	E-mail		
NAME OF TREASURER				
Mailing address			CHECK IF CHANGED SINCE PREVIOUS	
City, Zip Code			REPORT	
Telephone number	Fax	E-mail		
	LING PERIOD (please check			
Type of Report:	Due Date:	Reporting Period:	T 1 21 2007	
( ) April Quarterly	April 11, 2005	January 6, 2005 – N	-	
( ) July Quarterly ( ) October Quarterly	July 15, 2005 October 11, 2005	April 1, 2005 – July July 6, 2005 – Septe		
( ) January Quarterly	January 17, 2006	October 1, 2005 – Ja		
If an election is held on Novemb	oer 8, 2005, participating commi	ittees must also file the fol	lowing reports:	
( ) 6-Day Pre-Election	November 2, 2005	October 1, 2005 – O	· ·	
( ) 42-Day Post-Election ( ) January Quarterly	December 20, 2005 January 17, 2006	October 28, 2005 – December 14, 2005	*	
( ) O ( )				
( ) Other (specify):				

Treasurer's Signature

**Date** 

Name/mailing address of candidate  Party Affiliation  Office sought  Elect	
Support Candidate(s)  Name/mailing address of candidate  Party Affiliation Office sought Elect  Date/ty Flect  Oppose Candidate(s)  Party Oppose Candidate(s)  Party Oppose Candidate(s)  Party Oppose Candidate(s)	
Oppose Candidate(s)  Party Office Sought Elect  Party Office Sought Date/ty	
Oppose Candidate(s)  Party Office Sought Elect  Party Office Sought Date/ty	
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Nome/mailing address of condidate Party Office Sought Date/ty	
Nome/mailing address of condidate Party Office Sought Date/ty	
Name/mailing address of candidate  Affiliation  Office Sought  Elect	ne of
Support PAC, Political Committee or Party Committee  Name of committee Address of committee	
Traine of committee	
Support/Oppose Referendum or Initiated Petition	
Indicate support	
Or opposition	

	Pageof
Name of PAC	(Schedule A only)
SC	CHEDULE A

# CASH CONTRIBUTIONS TO PAC

Include the names and mailing addresses of contributors who have given more than \$50 to the PAC after The PAC has registered, the amount contributed by each donor, and the date of the contribution.

Do not include in-kind contributions or loans on this schedule.

DATE RECEIVED	Contributor's name, mailing address, zip code (Contributions in excess of \$50)	Occupation, Principal Place of Business (employer)	Amount
	1. Total cash contributions this page only		
	Complete lines 2-4 on last page of Schedule A only: 2. Total from attached Schedule A pages	1	
	3. Aggregate of cash contributions of \$50 or less not itemized	,	
	4. Total cash contributions this reporting period (Add lines 1, 2 & 3) (Enter on Schedule G, line 1(a))		

	Page of
Name of PAC	(Schedule B only)

## **SCHEDULE B**

## EXPENDITURES CONTRIBUTIONS TO CANDIDATES, COMMITTEES

Do not include in-kind expenditures on this schedule.

Date of Payment	Candidate/committee's name	Candidate/committee's address Zip code	Amount contributed this reporting period	aggregate amount contributed to this entity during campaign
	1. Total contributions to candidates this page only			
	Complete lines 2-3 on last page of Schedule B only:  2. Total from attached Schedule B pages			
3. Total contributions to candidates this reporting period				

	Page of
Name of PAC	(Schedule B only)

## **SCHEDULE B-1**

## EXPENDITURES OPERATING EXPENSES

Do not include loan repayments on this schedule.

Date of Payment	Payee/organization name, Address, zip code	Purpose of expenditure	Amount
1. Total operating expenses this page			
Complete lines 2-3 on last page of Schedule B-1 only:  2. Total from attached Schedule B-1 pages			
3. Total operating expenses this reporting period (Add lines 1 & 2) (Enter on Schedule G, line 4(b))			

	Page of
Name of PAC	(Schedule C only)
	C

#### IN-KIND CONTRIBUTIONS/EXPENDITURES

PART 1. With respect to <u>all</u> items and services received and expended, enter the date received, a description of the item or service, and the fair market value. Enter contributor information if the fair market value of donated item or service is <u>more</u> than \$50.

Date Received	Contributors name address vin anda			
1. Total in-kind contributions/expenditures this page only				
Compete lines 2-3 on last page of Schedule C, Part 1 only: 2. Total from attached Schedule C, Part 1 pages				
3. Total in-kind contributions received and expended this reporting period (Add lines 1 & 2) (Enter on Schedule G, lines 1(b) and 4(c)				

PART 2. If the items shown in Part 1 were, in turn, contributed to candidates or candidate committees, list the candidates/committees to whom the items were donated and describe the items given. Amounts in this part are not entered on Schedule G, Summary Section.

Date of payment	Candidate/committee's name, address, zip code	Description of goods, services, discounts or facilities contributed	Fair market value

#### **SCHEDULE D**

#### LOANS/LOAN PAYMENTS

List loans from all noncommercial sources and any financial institutions in this State.

#### PART 1 – LOANS/LOAN REPAYMENTS – OTHER THAN FINANCIAL INSTITUTIONS IN MAINE

		COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4
Date of loan/ loan repayment	Identity of lender	Loan balance from previous period	Amount loaned this period	Amount repaid/ forgiven this period	Unpaid loans Columns 1 + 2 - 3
1.Total Non-F	inancial Institution Loan Activity This Period		Sched. G, line 2a	Sched. G, line 5a	

#### PART II – LOANS/LOAN REPAYMENTS – FINANCIAL INSTITUTIONS IN MAINE

			COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4
Date of loan/ loan repayment		Full name and address of lender	Loan balance from previous period	Amount loaned this period	Amount repaid/ forgiven this period	Unpaid loans Columns 1 + 2 - 3
	2.	Total Financial Institution Loan Activ	ceived This Period (Total of lines 1 & 2,		Sch. G, line 5b	
	3.	Total Loans Received This Period (To (column 2) (Enter on Schedule G				
	4.	Total Loan Repayments This Period (Total of lines 1 & 2, column 3) (Enter on Schedule G, line 5(c))			Sch. G, line 5c	
	5.	5. Unpaid Loan Balance at Close of This Period (Total of lines 1 & 2, column 4)				

Name of PAC	

**SCHEDULE E** 

#### **PLEDGES**

Pledges from one person aggregating more than \$50 must be itemized.

Date of Pledge	Date of Pledge Name, address, zip code of person making pledge		
	1. Total pledges (attach additional page if necessary)		
	2. Aggregate of pledges of \$50 or less not itemized		
	3. Total pledges this reporting period (Add lines 1 & 2)		

#### **SCHEDULE F**

## TOTAL OUTSTANDING BILLS (OTHER THAN LOANS)

List bills previously reported if still unpaid this reporting period. Do not include actual expenditures on this schedule.

Date obligation Incurred	Creditor's name, address, zip code	Purpose	Amount

Name of PAC		

**Date Submitted** 

## SCHEDULE G SUMMARY SECTION

Complete other applicable schedules before completing this schedule. Enter column 3 figures from previous report in column 1 of this report.

Enter column 2 figures as indicated for each line. Add column 1 to column 2 and enter in column 3.

If this is your first report, leave column 1 blank; amounts in columns 2 and 3 will be the same.

			COLUMN 1	COLUMN 2	COLUMN 3 TOTALS
			FROM COLUMN 3 PREVIOUS REPORT	TOTALS THIS REPORT PERIOD	DURING CAMPAIGN OR YEAR (add Columns 1 & 2)
1.	RE	CEIPTS		I a	
	(a)	Cash Contributions		Schedule A, line 4	
	<b>(b)</b>	In-kind Contributions		Schedule C, line 3	
	(c)	Other Receipts (interest income, etc.)			
	( <b>d</b> )	TOTAL RECEIPTS OTHER THAN LOANS (add lines 1a through 1c)			
2.	LO	ANS RECEIVED			
	(a)	Noncommercial Sources		Schedule D, line 1, column 2	
	<b>(b)</b>	Financial Institutions		Schedule D, line 2, column 2	
	(c)	TOTAL LOANS RECEIVED (add lines 2a and 2b)		Schedule D, line 3	
3.	_	TAL RECEIPTS WITH LOANS I lines 1d and 2c)			
4. EXPENDITURES					
	(a)	Contributions to Candidates/Committees		Schedule B, line 3	
	<b>(b)</b>	Operating Expenses		Schedule B-1, line 3	
	(c)	In-kind Expenditures		Schedule C, line 3	
	( <b>d</b> )	TOTAL EXPENDITURES OTHER THAN LOAN REPAYMENTS (add lines 4a through 4c)			
5.	LO	AN REPAYMENTS			
	(a)	Noncommercial Sources		Schedule D, line 1, column 3	
	<b>(b)</b>	Financial Institutions		Schedule D, line 2, column 3	
	(c)	TOTAL LOAN REPAYMENTS (add lines 5a and 5B)		Schedule D, line 4	
6.		AL EXPENDITURES WITH LOAN AYMENTS (add lines 4d and 5c)			
7.	ACC	OUNT BALANCE (subtract line 6 from line 3)			